



Please type a plus sign (+) inside this box → ☐

#3

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted  
with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	P02285US5
First Named Inventor	ROTHSCHILD, Max F.
<b>COMPLETE IF KNOWN</b>	
Application Number	09 / 900,063
Filing Date	July 6, 2001
Group Art Unit	1655
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROLACTIN RECEPTOR GENE AS A GENETIC MARKER FOR INCREASED LITTER SIZE IN ANIMALS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

07/06/01

as United States Application Number or PCT International

(if applicable).

Application Number

09/900,063

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/022,180	07/19/1996	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label ☐ Correspondence address below

22885

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Max F.

Family Name  
or Surname

Rothschild

(first and middle [if any])

Inventor's  
Signature

*Max F. Rothschild*

Date

8/31/01

Residence: City

Ames

State

Iowa

Country USA

Citizenship USA

Mailing Address

511 Oliver Circle

Mailing Address

City

Ames

State

Iowa

ZIP

50010

Country

USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Amy L.

Family Name  
or Surname

Vincent

(first and middle [if any])

Inventor's  
Signature

*Amy Vincent*

Date

9/4/01

Residence: City

Jewell

State

Iowa

Country USA

Citizenship USA

Mailing Address

1206 2nd Street

Mailing Address

City

Jewell

State

Iowa

ZIP

501301

Country

USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

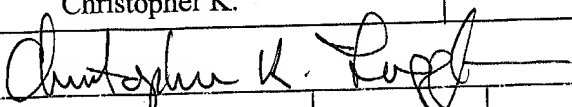
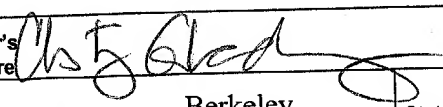
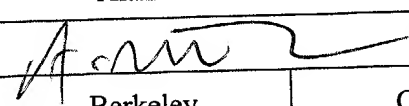
PTO/SB/02A (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christopher K.		Tuggle	
Inventor's Signature 		Date 8/31/01	
Residence: City	Ames	State	Iowa
		Country	USA
Citizenship USA			
Mailing Address 911 Douglas Avenue			
Mailing Address			
City	Ames	State	Iowa
		ZIP	50010
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christy		Gladney	
Inventor's Signature 		Date 9-10-01	
Residence: City	Berkeley	State	CA
		Country	USA
Citizenship USA			
Mailing Address PIC International Group			
Mailing Address 2929 Seventh Street, Suite 130			
City	Berkeley	State	CA
		ZIP	94710
		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alan		Mileham	
Inventor's Signature 		Date 9-10-01	
Residence: City	Berkeley	State	CA
		Country	USA
Citizenship UK			
Mailing Address PIC International Group			
Mailing Address 2929 Seventh Street, Suite 130			
City	Berkeley	State	CA
		ZIP	94710
		Country	USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

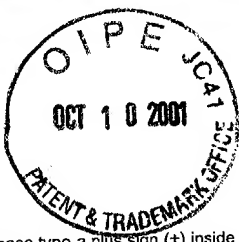
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

# DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet:  
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Olwen		Southwood	
Inventor's Signature <i>Olwen Southwood</i>		Date <i>27 Sep-2001</i>	
Residence: City	Abingdon	State	Oxon
		Country	UK
Citizenship UK			
Mailing Address PIC International Group			
Mailing Address Fyfield Wick			
City	Abingdon	State	Oxon
		ZIP	OX 13 5NA
		Country	UK
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Graham		Plastow	
Inventor's Signature		Date	
Residence: City	Cambridge	State	UK
		Country	UK
Citizenship UK			
Mailing Address PIC Laboratory - University of Cambridge, Pathology Dept.			
Mailing Address Tennis Court Road			
City	Cambridge	State	UK
		ZIP	CB2 1QP
		Country	UK
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Carole		Sargent	
Inventor's Signature		Date	
Residence: City	Cambridge	State	UK
		Country	UK
Citizenship UK			
Mailing Address PIC Laboratory - University of Cambridge, Pathology Dept.			
Mailing Address Tennis Court Road			
City	Cambridge	State	UK
		ZIP	CB2 1QP
		Country	UK

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 2 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Olwen		Southwood	
Inventor's Signature		Date	
Residence: City	Abingdon	State	Oxon
Country	UK	Citizenship	UK
Mailing Address			
PIC International Group			
Mailing Address			
Fyfield Wick			
City	Abingdon	State	Oxon
ZIP	OX 13 5NA	Country	UK
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Graham		Plastow	
Inventor's Signature		Date	
		3/9/01	
Residence: City	Cambridge	State	UK
Country	UK	Citizenship	UK
Mailing Address			
PIC Laboratory - University of Cambridge, Pathology Dept.			
Mailing Address			
Tennis Court Road			
City	Cambridge	State	UK
ZIP	CB2 1QP	Country	UK
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carole		Sargent	
Inventor's Signature		Date	
		3/9/01	
Residence: City	Cambridge	State	UK
Country	UK	Citizenship	UK
Mailing Address			
PIC Laboratory - University of Cambridge, Pathology Dept.			
Mailing Address			
Tennis Court Road			
City	Cambridge	State	UK
ZIP	CB2 1QP	Country	UK

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.